



Republic of the Philippines
PHILIPPINE CHILDREN'S MEDICAL CENTER
 Quezon Ave. Quezon City
 Tel. No.: 8588-9900 loc. 224, 226, 361, 355
 Fax no.: 85889997 • e-mail: pcmcproc@gmail.com

PURCHASE ORDER
 FOR SUPPLIES OR EQUIPMENT

Nº 74517

P. R. NO. PERI-2023-001 Dated: 10/11/2022
 MODE OF PROCUREMENT
PB
 CS No. NOA-2023-014-002 AC No. R2023-00-022
 DATE OF P.O. January 19, 2023

TO: Supplier/Dealer Contractor DYNAMED HEALTHCARE INCORPORATED Tel: 241-2655/241-2660
 Address: 3rd Floor Metrofocus Bldg. 42 Tomas Morato Avenue, Quezon City Direct Line: 252-5037

Department/Office/Division/Section/Unit where delivery Is to be made: _____
 Location: Supply & Property Section
 Special Instructions: Ground Floor, PCMC Bldg.
 Delivery period: 7 working days Other Terms: _____
 Performance Security Posted: Surety Bond No. G(13)-A-CAD05A74-002656
 Cash / Cashier's / Manager's Check No. _____
 PCMC O.R. No. _____ Amount P 15,444.00

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	60	pc	Cautery Cord, Disposable Dynapen cautery pencil, 100's per box, Intco INTCO MEDICAL (HK) CO., LIMITED, China	188.00	11,280.00
2	150	pc	Pad, Cautery Ground, Adult, disposable Dynapad, Cautery Ground, Adult, disposable, 50's per box, Intco INTCO MEDICAL (HK) CO., LIMITED, China	268.00	40,200.00
Nothing Follows Note: For the use of Perinatology Div. All deliveries shall have at least One (1) year expiration period.					51,480.00 wwwwww (Fifty one thousand four hundred eighty pesos only)

Penalty Clause for Delayed or Unsatisfactory Deliveries:

- One-tenth (1/10) of one percent (1%) of the cost of unperformed portion for everyday of delay. Once the cumulative amount of liquidated damages reaches 10% of the amount of the contract, the Procuring Entity may rescind or terminate the contract without prejudice to other courses of action and remedies available under the circumstances
- Excess in price, if procured from third parties, through alternative mode of procurement; and
- In case of bidding, forfeiture of performance bond equal to 5% of the undelivered item/s.

Additional Instruction & Conditions:

- Staggered Delivery / Payment
- Delivery will take effect upon receipt of delivery confirmation of quantity/date
- Delivery is w/in 7 working days upon receipt of delivery confirmation
- PCMC has the right to reject or cancel any item in this PO for justifiable and reasonable grounds where the award will not benefit the Government
- Terms and conditions specified on Notice of Award

Funding Code 5-02-03-080 / and 1/26/23

FUNDS AVAILABLE: P51,480.00

Attachments:

- P.R. No. _____
- x Abstract of PERI-2023-001
- x Canvass Sheet/Tender of Bids
- Notarized Certification of Exclusive Distributor
- Justification
- Others _____

TOTAL AMOUNT P 51,480.00

CERTIFICATION

This is to certify that I received today the copy of this Purchase Order, and held the Company bound by the terms and stipulation of the contract and other laws applicable.

(Signature over printed name)

Date: _____

LOURDES CH. DELA ROSA REYES, CPA

OIC - Accounting Division
 APPROVED:

SONIA B. GONZALEZ, M.D., MS, CHSM, MPM
 Executive Director

NOA-2023-014-002 / NTP-2023-152

Distribution : White (Original) - Attachment to payment
 Yellow (Duplicate) - Procurement
 Pink - Supply and Property



Republic of the Philippines
DEPARTMENT OF HEALTH
PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City 1100

website: www.pcmc.gov.ph email: officeofthedirector@pcmc.gov.ph

Trunk Line: 8588-9900 to 20 Direct Line: 8924-6601

NOTICE TO PROCEED
NTP-PROC-2023-152

January 19, 2023

DYNAMED HEALTHCARE INCORPORATED

3/F Metro Focus Bldg., Tomas Morato Ave. \



Brgy. Kristonghari, Quezon City

Tel: 241-6560

Sir/Madam:

This is to inform you that Purchase Order No. 74517 as a result of Public Bidding
for the Procurement of Perinatology Supplies CY 2023
has been approved.

You may now proceed with the delivery of the items listed in the attached Purchase Order within
7 (Seven) working days from receipt of this notice and/or Delivery Order Slip
for staggered delivery.


SONIA B. GONZALEZ, M.D., MScHSM, MPM
Executive Director 

CONFORME:
Received Original

Signature Over Printed Name
Authorized Representative
Date: _____

